

IFW A

Application No.:

10/724,871

Confirmation No.: 1629

**Applicants** 

Randall S. HICKLE December 2, 2003

Filed TC/A.U.

3739

Examiner

Beverly Meindl Flanagan

Title

SYSTEMS AND METHODS FOR PROVIDING

GASTROINTESTINAL PAIN MANAGEMENT

Docket No.

82021-0043

Customer No.:

24633

## . Mail Stop Amendment

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

## AMENDMENT TRANSMITTAL

Sir:

Transmitted herewith for filing is an Amendment in response to the Office Action mailed August 13, 2004, in the above-identified application.

Applicant petitions for an extension of time, the fees for which are set forth in 37 C.F.R. § 1.17(a), for the total number of months checked below:

Total Months Requested	Fee for <u>Extension</u>	Fee for Small Entity	
one month two month three month four month five month	\$ 120.00 \$ 450.00 \$ 1020.00 \$ 1590.00 \$ 2160.00	\$ 60.00 \$ 225.00 \$ 510.00 \$ 795.00 \$ 1080.00	

Extension of time fee due with this request: \$1020.00

If an additional extension of time is required, please consider this a Petition therefore.

The fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE
TOTAL	24	MINUS	24	= 0	x 50/25 =	\$ 0.00
INDEP.	5	MINUS	5	= 0	x 200/100 =	\$ 0.00
Three Month Extension of Time			\$ 1020.00			
					TOTAL	\$ 1020.00

	No additional fee is required.
$\boxtimes$	A check in the amount of \$\(\frac{1020.00}{2}\) is attached.
	Please charge my Deposit Account No. 50-1349 the amount of \$ .
	The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1349.
	Any filing fees under 37 C.F.R. §1.16 for the presentation of extra claims.
	Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,

**HOGAN & HARTSON LLP** 

Dated: January 25, 2005

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